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An introductory lecture

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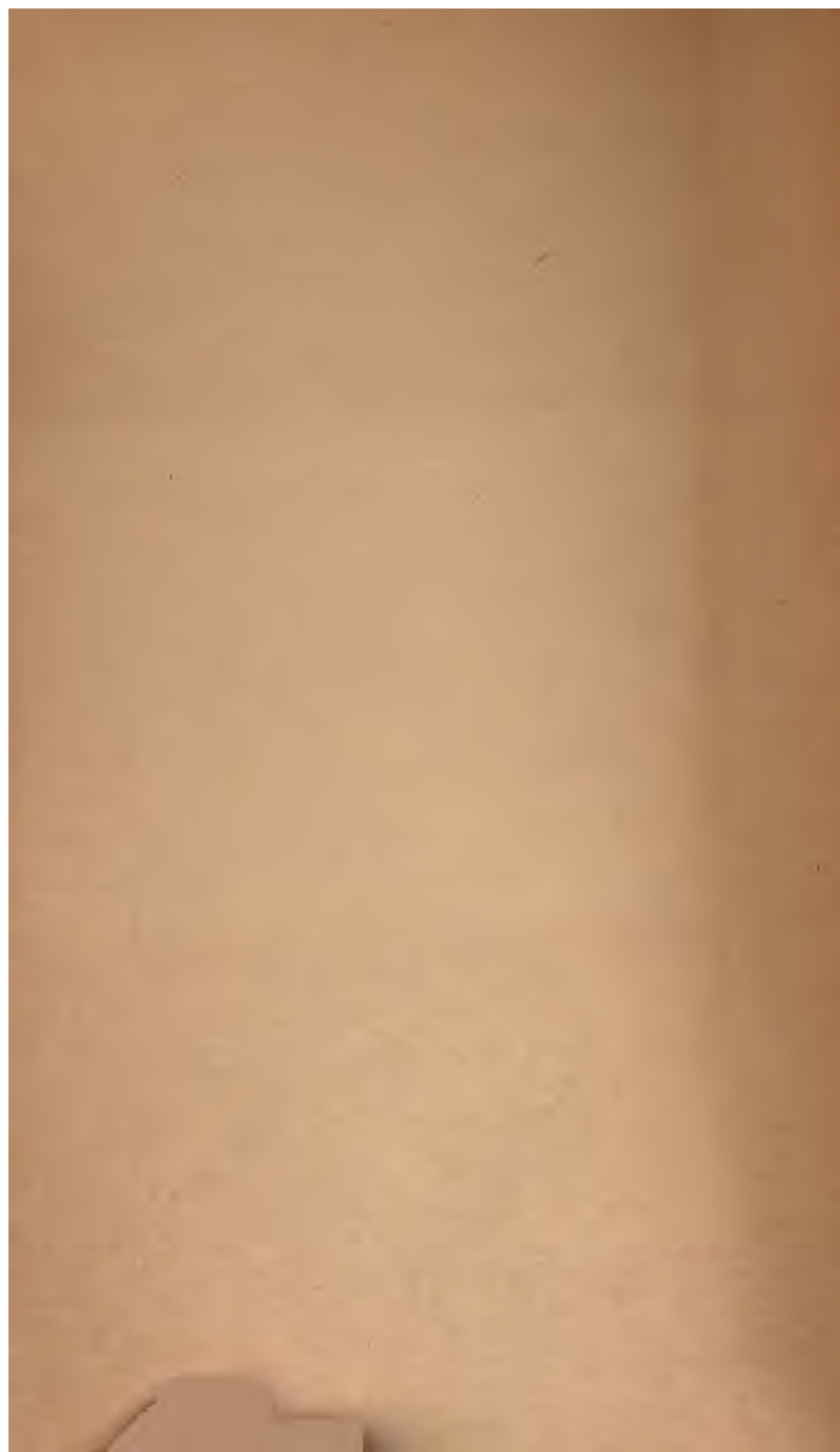
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**HISTORY OF MEDICINE
AND NATURAL SCIENCES**





AN
INTRODUCTORY LECTURE
BEFORE THE
MEDICAL CLASS OF 1855-56
OF
HARVARD UNIVERSITY.

By D. HUMPHREYS STORER, M.D.
PROFESSOR OF MIDWIFERY AND MEDICAL JURISPRUDENCE.

BOSTON :
PRINTED BY DAVID CLAPP.
MED. AND SURG. JOURNAL OFFICE.
1855.

Prof. D. HUMPHREYS STORER,

Dean of the Medical Faculty :

SIR :

The Students of the Medical Class who have heard the eloquent Introductory Lecture of this year, wishing to renew their pleasure by a perusal of it, request that you would be so kind as to lend them a copy, that they may have it printed.

GUSTAVUS HAY,
CHARLES EDWARD BRIGGS, } *Committee.*
WILLIAM THORNDIKE,

Boston, Nov. 10, 1855.

GENTLEMEN :

Your polite request for my Introductory Lecture has been received. It is at your disposal.

Very truly, your friend,

D. HUMPHREYS STORER.

Messrs. GUSTAVUS HAY,
CHARLES EDWARD BRIGGS,
WILLIAM THORNDIKE.

Boston, Nov. 12, 1855.

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1865

AN ADDRESS
ON THE
DUTIES, TRIALS AND REWARDS
OF THE
STUDENT OF MIDWIFERY.

A D D R E S S .

GENTLEMEN :

It seems but yesterday, since, within these walls, farewell words were spoken, and friendship's blessings were invoked ; that we saw before us a corps of young, well-educated physicians, full of life and hope and ambition, just commencing their professional career ; upon whom we looked with pleasure, not unmingled with pride. The revolving season has again brought us here. I distinguish some familiar faces, with whom I have had the pleasure of daily intercourse—others, to me as yet unknown—all, however, assembled for the same great object, the accomplishment of the same great end—the acquiring of a professional education.

Previous to commencing the regular course of lectures, it has been customary in this institution, as well as, I believe, in every similar medical school in our country, to have an introductory address delivered by one of the instructors. The brief space allowed for such an address must necessarily forbid the occupying of any extended ground ; of any attempt even to skim over the surface of the great divisions of our professional studies. It is not unusual, there-

fore, for the lecturer to confine his attention to a general consideration of the subject he is expected to teach ; to endeavor to show, while he deeply feels and silently acknowledges the value of every branch of his profession, that the department entrusted to him to elucidate, is second to none in its importance. Let me then attempt to secure your attention to the course about to be commenced, by pointing out, at this time, some of the duties, the trials, the rewards of the student of midwifery.

In order that you may become members of the medical profession, you are required to pursue a defined course of study, and a fixed period is allowed for your preparation—a period exceedingly limited, and necessarily requiring your faithful, untiring industry. If you have deliberately decided to devote your lives to the study of medicine, the years of preparation before you will be full of constantly increasing interest and enjoyment. You will find no diminution in your efforts—no satiety ; new incentives to exertion will be daily presented—new claims to your fidelity observed.

If, however, you have unwillingly, or without having seriously considered the importance of the step, commenced your journey—if, as you advance, you are dissatisfied—your studies are irksome—for them you not only feel no enthusiasm, but an utter disgust—I would urge you to proceed no farther : relinquish the idea of entering our profession—engage in some more congenial pursuit. Ours is a calling requiring all a man's concentrated energies—worthy all a man's undying devotion.

While pursuing your elementary studies, think not yourselves, nor be persuaded by others, that any of the branches should be neglected in order that others may receive a greater share of your attention. All that are required, in their place are equally important. Anatomy and Physiology should unquestionably claim your first thoughts—as the foundation upon which the entire superstructure must be erected. As you become familiar with these, and advance in your course, each of the other branches should claim your application. If you would successfully compete with your cotemporaries; if you would attain to any eminence in your profession; if you would satisfy yourselves; you must acquire an intimate acquaintance with each of the departments of our science.

To the gentlemen associated with me, I shall leave the duty of impressing upon your minds the importance of their respective subjects—presuming to discourse only upon my own.

The science of midwifery treats of the anatomy and physiology of the organs peculiar to the female; of their numberless diseases and the methods of their treatment; of the means of alleviating suffering at the period of parturition; and of warding off, or successfully combating, the affections of the puerperal state.

No class of diseases requires for its successful management a more thorough knowledge of the organs implicated. Several symptoms of one derangement are frequently present in others—oftentimes those of considerable magnitude—requiring for their

diagnosis no little judgment, tact, experience—and embarrassing the most sagacious practitioner.

No more trying duty can befall a member of our profession, than to be called upon to treat such cases as are often witnessed by the accoucheur. When life is suspended by a mere thread—the heart hesitates to throb—the next moment may remove the breathless suspense of agonized friends, or leave a household irrevocably desolate.

The practitioner in this department must be prepared to make great sacrifices. None are compelled to toil more incessantly nor more arduously. None pass so large a portion of their time in the chamber of the sick—none are called upon to observe more intense suffering—to administer aid in cases of more heart-rending distress. None are obliged to relinquish so many of the social enjoyments of life.

In order faithfully to prepare himself for the important duties to be undertaken, the student should be made aware that many of them are of a peculiar character; that he may be called upon at any moment, most unexpectedly, to render assistance in cases of urgent suffering; that many of the affections which will fall under his observation, so far from being preceded by intelligible warnings, and developing themselves gradually as they make their inroads, offer no premonitions—but burst at once upon the defenceless system, in their worst phases, overwhelmingly.

Within a comparatively short period, a fresh impetus has been given to the study of the derangements incident to the female; their pathology has

become better known ; new means of investigation have been devised and introduced into general use ; many long existing errors have been corrected ; new and successful methods of treatment have been adopted. With all these, the student should be familiar. She who entrusts herself to his care confides implicitly in his ability to relieve her : she feels that he is perfectly acquainted with her distresses, and is able in his inquiries even, to anticipate her recital. She throws herself upon his honor—and trusts with a fervency, such as none but woman feels, in his integrity. Let not that favorable opinion be removed—let not that confidence be misplaced ; but by your constant endeavor, carefully, faithfully to investigate each case as it is presented to your notice, prove that you are worthy all that may be entrusted to you.

The physician in general practice is daily called upon to prescribe for cases trifling in their nature, frequently requiring no medical treatment—and his attendance is limited to his first and only visit. The great susceptibility of the female character, causing her to be so readily influenced by mental emotions, would lead us naturally to suppose that she would be equally readily affected by physical derangements ; that very slight causes, such as would scarcely be noticed by man, would be looked upon by her as important ; that acute suffering would never be concealed ; and that severe diseases, when known to her to be malignant and necessarily fatal in their result, would render her utterly powerless ; would leave her in a state of hopeless despair. Yet how far from this is the truth ! How often are serious affections

borne for months and years without the slightest reference being made to them, by the sufferer, to her nearest relatives ; how often does she look upon her physician as her only confidant, and to him alone open her heart ; how often, when informed that her disease cannot be remedied by art, does she toil on—performing her customary avocations with her usual cheerfulness, until her emaciated frame and faltering step refuse further duty—until the end of her journey is nearly reached, and the fearful tale can no longer be withheld from her family !—thus presenting us an example of the truest heroism, the purest resignation.

In the treatment of the affections I have referred to, the first effort of the physician should be to obtain the confidence of his patient. This remark, though applicable in all cases, may here be used with peculiar force. A delicate, refined female involuntarily shrinks from making known her derangements to a stranger ; she bears them not infrequently, until they have become utterly unbearable ; too often, until the recent and remediable malady has become irremediable. Her motives for this delay should be valued ; her feelings should be regarded, and not, as is frequently the case, rudely ridiculed or unjustly misinterpreted. Proportionate, if I may so speak, to the modesty and delicacy with which a case has been related, is almost necessarily our interest and sympathy. Every case which falls under our notice, should unquestionably claim our attention. Every patient committed to our charge, has a right to, and should receive, our faithful care. Still we cannot feel for all,

the same interest, the same solicitude. The mere physical distress attracts our attention in some—to remove this distress appears our only duty: while in others, by the peculiar accompanying circumstances, an unusual interest is involuntarily awakened. No greater care is exercised in investigating the history of the case; no greater effort is made to remove the cause of the disease—still we find ourselves unconsciously interested to an unusual degree. Although this not infrequently occurs with regard to the class of cases I have referred to, I would not imply that such feelings are demanded, or even expected by the sufferer. I would not imply that an intelligent female requires any unusual courtesy of manner, or the appearance of any extraordinary regard to be extended towards her. But she does expect her confidence to be reciprocated. She does expect that uniformly gentlemanly deportment, that constant kindness, that fidelity, which ever characterize the true physician. To possess her confidence, these must be extended to her. They are seldom proffered in vain.

It is often of the utmost importance, in treating the complaints of the female, that the physician should divert the mind of the invalid as much as possible from herself; that, as favorable an opinion of her case should be given as possible, consistent with truth; that all the encouragement which is justifiable, should be extended towards her. For although, as I have already observed, she nobly bears her ills, particularly when they are of an acute or aggravated character, yet it would be unnatural that she should

not be more or less depressed, when deprived of the enjoyments of society ; and at times almost imagine that her life was valueless. This, not to be entirely surmounted *ennui*, is oftener relieved by the physician, than by any other friend.

From the very fact that a degree of secrecy is generally observed in these cases—that they are most reluctantly entrusted to the physician—an additional reason exists for his uninterrupted attention—for the expression of his frank, unreserved opinion. If in one case he is careful to offer all the encouragement in his power, he should be equally cautious in another not to magnify the extent of the disease, nor the difficulty of removing it, to the patient or her friends. Such a course, it is true, could not be pursued by an honorable man : none but unworthy members of our profession—who have engaged in it merely for a livelihood, which they are determined to obtain without regard to the means employed, could so far disgrace themselves as to prolong the sufferings of others to advance their own selfish ends ; or intentionally to deceive a patient with respect to her situation, to improve their pecuniary interests. There are men, in our profession in all large communities, whose patients are invariably very sick ; whose cases are the most desperate of their kind. In many instances, at the brink of the grave to-day, and to-morrow perhaps out of danger. This ruse sometimes answers long—with a portion of the public, even for a life-time. But sooner or later, the intelligent portion of the community understand the stratagem and condemn

it; while by his brethren, such an individual is regarded with the utmost contempt.

The esteem of a patient is by no surer method secured, than by the physician's explaining, in an intelligible manner, the true nature of her disease, and the reasons for the treatment which he is pursuing. The physician is sometimes found, who considers it really presumptuous for any questions to be asked by his patient; who feels that she must rely implicitly upon his directions, and be satisfied to remain entirely ignorant of any of the minutiae of her case; who really considers himself insulted, if any interference, as he terms it, is intimated. It is not a little singular that any rational beings should be willing to entrust their lives in the hands of even the most distinguished members of our profession, without first having learned from them an account of their derangements, and an opinion as to their probable result. Yet, the human mind is so constituted that upon those subjects which are really of the greatest importance to us, we scarcely devote a thought, while others comparatively insignificant attract a large share of our attention. But few there are, however, who are not gratified, when their physician at a proper moment points out to them, in a sympathizing and friendly manner, their true condition; the reasons why, if some symptoms are unfavorable and alarming, others are to be regarded as favorable and hopeful. And upon this fact of her having been made acquainted with her real condition, may the medical attendant, frequently, rely with confidence, upon a state of feeling, exceedingly important to exist during the treat-

ment of the case. The mind, tranquillized by a removal of the state of suspense by which it had been disturbed, ceases to suffer from imaginary troubles, and the present, real malady is borne with scarce a murmur.

Sometimes the disease is of a nature which seems to justify and even to demand a *surgical operation*. When but little danger is involved by such a course, and the existing cause is evidently producing a deleterious influence upon the system, the propriety of the operation may admit of no argument—but is at once unqualifiedly recommended. If, however, by a severe operation, even rendered painless by art, the system is to receive a shock from which it may with difficulty re-act; and re-act only to be again the prey of an insatiable and merely momentarily appeased hydra;—if each succeeding day the grasp of the destroyer is to become more and more inexorable as the powers of resistance become less;—if a wretched existence is merely to be a little prolonged; the physician, previous to assuming such a responsibility, should make known all his reasons for and against it: should state the facts as they are; the inevitable termination; and then be governed by his patient's wishes, and those of her friends.

Should a case present, where the general health has not as yet become perceptibly affected, and still derangement exists which will undoubtedly continue to advance, and eventually will destroy the life of the patient—and a few instances have occurred, in which favorable results have followed the employment of the knife—few, it may be, compared to those

which have terminated fatally, the situation of the physician is a very trying one. The patient has already been made acquainted by her numerous female friends, with all the successful terminations: she is perfectly familiar with the details of each case, and has carefully preserved the addresses of those by whom the operations have been performed. She is wrapt in astonishment as she relates the characters of the tumors—their oftentimes enormous size—their attachments—their adhesions—the dexterity with which they have been removed—the rapidity with which those operated upon have convalesced. She can perceive no differences in the cases reported, from her own—and is extremely anxious to submit herself to a similar operation.

The physician, on the contrary, is aware of the failures also. He knows the imminent risk necessarily incurred; that cases which seem the most proper for an operation, granting its performance to be ever justifiable, prove sometimes to have been most unsuitable; that the apparently slight deterioration of the system by no means proves that it can bear with impunity the process necessary for the removal of the annoying organ; that derangements of this nature may exist, not unfrequently for a series of years, without producing any physical suffering, and but slight real inconvenience; that she who might be spared yet a long time to enjoy, and to be enjoyed by, her friends, may thus be hurried to an untimely grave. He knows all this, and cannot acquiesce with the wishes of his patient, until he has first made her acquainted with the reasons why he could not volun-

tarily advise the course she wishes to have pursued, nor cheerfully assume the responsibility ; until the case has been investigated by other, eminent professional men, and their opinion justifies his interference ; until the operation is demanded. There ever will be those who require no urging to perform whatever surgical operation may offer ; the fact that it may be performed and the patient not sink at once, seems to be all that is required in their opinion to justify it ; the fatal result is to them of but little importance ; the gaping crowd, who may witness the achievement, disperse with the most vivid impressions of extraordinary accomplishment, and but few of them will ever hear of, or even inquire for, the termination. The great object, for which it has been performed, is realized ; the infrequent opportunity has been improved ; and emboldened by his temporary success, the surgical obstetrician holds himself ready to search into the recesses of the abdominal cavity with as much *sany-froid* as he would lay open a furunculus or a carbuncle. If, after mature deliberation, an operation thus involving the life of his patient should be determined upon, it is equally the duty of the physician to make public the result should it be disastrous as if it were successful—and he should be cautious in no instance to report his case as favorable, until the system has completely recovered from the effects of the operation—until the patient's health is restored. Unintentionally, serious injury is often done to the cause of science, by a premature publication—by the reporting of cases too hastily, before they have terminated. The

value of statistical tables thus prepared, is worthless,—and the character of the narrator, for judgment and accuracy, is rendered unenviable. And it must be evident to any reflecting mind that the withholding of unfortunate cases, or only carelessly referring to them, cannot be too strongly reprobated. Any attempt to produce a different impression than the true one; to present cases in a different light than they should be placed, is an obstacle in the search for truth—is duplicity. And no individual, however extensive may be his attainments—however exalted his position, can descend to such a course, without irrevocably compromising his honor. Nothing should be concealed. X He who faithfully discharges his duty with such light as he may possess, need fear no ordeal. He earnestly endeavors to relieve the sufferings of his patients, but he cannot control their destinies. Inefficacious though his efforts may have been, towards those efforts he solicits the severest scrutiny—conscious that the more rigid the investigation, the more gratifying will be the result. X *Storer*

A case may occur in which the symptoms are of such an anomalous character, that great difficulty shall exist in determining it. Some peculiar appearances may be present, leading the physician strongly to suspect that an immorality has been committed; that the chastity of his patient is lost. And yet it is of vital importance that such a suspicion should not even be breathed to the most confidential friend, until the proof is irresistible. Not until “he who runs may read”—he who has eyes may see—but, until he who has ears shall have heard—and by a moment’s auscultation settled months of suspense.

Such instances cannot be spoken of too emphatically; the physician cannot be too deliberate in forming his opinion, nor too careful in expressing it. When he remembers that life is not merely at stake, but what, to a virtuous woman, is of infinitely more value than life; that the peace, happiness, character of a family rest upon his sentence; that to give a verdict before the facts are conclusively proved, is not only unjust, but cruelty—cruelty unmitigable; when he remembers, that should his judgment prove to have been erroneous, the die is cast—the reproach has reached a censorious, uncharitable, I had almost said unforgiving world;—when he remembers that the heart of the wronged one is already broken; what must be his remorse—what his misery? The wretchedness he has unnecessarily, voluntarily produced, can never be assuaged. His own peace of mind can never be tranquillized. He feels that the finger of scorn is pointed at him—and the justness of the condemnation weighs upon his spirit like a perpetual incubus. I need not place before you imaginary instances. I need not suppose an extreme case to put you upon your guard, and to show you the unhappiness which might be occasioned by a want of judgment. Few physicians, of any experience, have been so fortunate as not to have been acquainted with such circumstances. If there is an individual present, who has not known an instance of the sorrow produced by the professional recklessness I have hinted at; or who thinks that I am dwelling unnecessarily upon this point, I would refer him to a case, which a few years since produced a deep impression upon the public mind; and awak-

ened a degree of sympathy commensurate with the peculiar situation of the sufferer. I allude to that of the maid of honor to the Duchess of Kent.

Having been indisposed for a considerable length of time, and a perceptible change occurring in her figure, a suspicion was awakened, which was not slow in gaining strength amongst the members of the royal household, that she was *enceinte*. This suspicion was announced to her by Sir James Clark, whose patient she then was. Horror-struck at the mere suggestion of being suspected of dishonor, she could only in the most solemn manner assert her innocence. "In answer to all his exhortations to confession, as the only means of saving her character, she returned an indignant but steady denial that there was anything to confess. Upon which, she was told that nothing but her submitting to a medical examination would ever satisfy them, or remove the stigma from her name." Degrading as was this edict to a delicate and refined lady, distinguished for her accomplishments and the purity of her character, and reluctant as was her mistress, the Duchess of Kent, "for her Royal Highness could not bear the idea of her being exposed to such humiliation"; although she knew that an examination of her dead body, which would soon take place, would remove every calumny; that when her lips were silent, her dust would be heard and be believed—this noble-spirited woman, true to the distinguished race from which she had sprung, unwilling to bear the slightest aspersion upon her character even for this brief space, submitted the next day "to the most rigid examination," and received from Sir James Clark, "a certificate," signed also by

Sir Charles Clark, "stating as strongly as language can state it, that there are no grounds for believing that pregnancy does exist, or ever has existed."

Already suffering from the inroads of an organic disease, beneath which she had been gradually sinking, her system could illy bear this superhuman burden,—and the crushed one shortly died. When that emaciated frame was examined, an organic disease of the liver fixed the scrutinizing eye of the royal physician—the chastity of the departed had been undefiled.

No one can read the history of the sufferings and death of Lady Flora Hastings without feeling the deepest commiseration; without keenly regretting that the shadow of a suspicion should have been entertained by one of the most distinguished physicians of Great Britain.*

Although, as I have before remarked, all the affections peculiar to the female, belong legitimately to the province of the student of midwifery—with which he is expected to be conversant—those which are more frequently connected with, and generally produced by the married state, generally claim a greater share of his attention. This undoubtedly arises in a measure from the fact, that many of them are liable to occur at a moment when his patient appears to be perfectly well, and no suspicion exists that any derangement is about to occur; and also, because they are among the most alarming and most fatal to which she is subject. Consequently he feels the necessity of being at all times ready to meet the blow when it shall be struck; of being self-reliant,

* See numbers of *Lancet*, 1839—March 30th, July 13th, August 17th.

calm, efficient, when all around him are unmanned. The great susceptibility of the system to be affected by any material change which may have been produced in any organ or set of organs, is never more perfectly illustrated, than by the innumerable sympathetic affections induced by pregnancy;—creating, for the most part, but little anxiety in the minds of friends, but being oftentimes the cause of great alarm and much real suffering to her who bears them. Physical pain is but a small share of the distress of her who is about to become a mother;—the universal derangement of the functions of the more important organs may produce such an effect, as even to cause a temporary change in her character, noticeable not alone by her most intimate friends, the members of her own family, but observed and remarked upon by strangers also. The most amiable and patient and saint-like disposition is frequently, at such times, rendered fretful, impatient, irascible. She who was wont to make all about her the happier by her presence, is carefully shunned. She is not herself—she is not responsible for her expressions or her acts. She is aware that she renders those around her unhappy, but she has lost her self-control. Great as must necessarily be her distress, the fact of its cause being obvious, and the probability that with its removal, her bodily and mental health will be restored—too often causes her friends to look upon her condition with so little apparent solicitude, that she imagines no sympathy is felt for her, and that she is treated with marked neglect. Nor is this suspicion always unfounded. Not only, occasionally, is no interest expressed, but the situation of the sufferer is made the subject of contempt.

uous ridicule, of heartless jeering. And even he, who should be familiar with the peculiar structure of the various organs, and their intimate relations with each other—and being thus conversant, thus enabled to trace their several connections, should at least admit the probability of the existence of the ills complained of—even he, to whom she looks with confidence for compassion, as well as relief, is sometimes also found disposed to meet her repinings with rudeness and a sneer. Humiliating as is the acknowledgment, the physician is now and then met with, thus regardless of the feelings of his patients—thus forgetful of the dignity of his profession.

Can it be wondered at that others should be neglectful, if those who should be among the first to proffer their aid, should withhold it? Is it suprising that they, who rely upon the opinion of a medical man, should look on with but little concern, if he assures them no real suffering exists? that the annoyances complained of are but temporary derangements—what all women under similar circumstances experience in a greater or less degree—that they are unavoidable—they must be borne—and should not be regarded? If the physician could always remember how much weight is often given to his remarks; how cautious he should be in expressing his views; how carefully his words are construed, and not infrequently misconstrued, he would undoubtedly be more guarded in his expressions—more slow in forming his opinion.

He is so frequently consulted in similar cases, and feels so well acquainted with their history, that he is apt to give the instance before him but a cursory *investigation*, and as hasty a judgment—not think-

ing how much gratification his language may produce, nor how much real distress. To this cause may, oftentimes, be attributed the apparent indifference which the kindest professional man exhibits—and not really, to any disposition to treat with levity, much less with coldness or derision, his patients' complainings.

We should remember, that although a cause of existing unhappiness may soon be removed, and the knowledge of this fact may enable the sufferer to bear its poignancy with greater resignation, the present pain, as long as it continues, may be equally excruciating, and calls equally for the kind attentions of friends, as if it were to be perpetual.

The duties, however, which devolve upon him in the capacity of accoucheur, are among the most arduous to be performed by the student of midwifery. The cases to which I have already referred, are of such a nature, that for the most part they can be deliberately investigated, and cautiously and experimentally treated. They are not of so urgent a character as imperatively to demand prompt, decided action; but time may be allowed, without any material injury being suffered, for the physician to examine the records of similar cases which may have been published, and to settle in his own mind their comparative value. In a word, he is enabled thus to obtain the advice and experience of the first men, in the profession, in the department in which he is engaged. He feels that he is not acting alone, but that they are his immediate counsellors; that with him, they are dividing the responsibility. Thus strengthened in his course, he pursues it with a confidence, which under other circumstances he could not possess.

The cases, on the contrary, requiring the services of the accoucheur, allow of no hesitancy; the patient cannot be left to-day unprescribed for, and attended to to-morrow. The morrow may, to her, never be; a few moments' delay may seal her fate. The physician's thought and act must be simultaneous—instantaneous. In no department of the profession is it more absolutely necessary that the practitioner should be aware of the difficulties which may be presented, and the means by which they should be opposed; none where there is greater need of self-possession, decision, not only to render efficient aid where the system may require it, but not to interfere unless assistance shall be demanded. In the hour of the severest physical suffering to which she is doomed—and greater than which cannot be borne—woman places no slight reliance upon the kindness and skill of her physician. When absent, he is constantly required; in his presence, she feels secure. She feels that, to a certain extent, her life is in his hands; that he knows her danger, and will watch and protect her; will do all in his power to alleviate her present misery, to prevent future derangement. This assurance of her safety aids her to bear with greater fortitude the ordeal through which she is passing; and even in the intervals between her most excruciating paroxysms, to be oftentimes not only cheerful, but joyous. The extent of the influence thus produced, depends, in a great measure, upon the conduct of her physician. If he is true to himself and his profession; if he really cherishes a deep and earnest interest in his patient; if the sympathy he expresses, his heart feels; she at once sees and appreciates. By his kindness and deli-

cacy of manner ; by his encouraging expressions ; by his uniform composure, his regard for her welfare cannot be doubted ;—and this knowledge of his fidelity which now mitigates the poignancy of her suffering, is cherished through years, and often through life, with the most grateful remembrance.

This reflection alone, that his duty well performed to his patients, makes them his warm and devoted friends—not unfrequently his best friends, should make him ever ready and anxious to administer to their necessities. The conscientious physician, however, needs no such incentive ;—gratifying as it must be to him to know that his efforts are held in just estimation ; that for him is entertained a sincere, an affectionate regard, he allows no purely selfish motive to control his conduct (unless that be called selfishness which prompts him at all times and under all circumstances to do *that*, and *that only*, which he considers right—aware that from such conduct alone can happiness be derived), but acts as if accountable, not to his patient, but to himself. The good opinion of others, he well knows, is not invariably based upon a proper foundation,—but is deduced too often, not from the skill and judgment exhibited by the physician in any given cases, but from their successful termination ; they little knowing, that proportionate to the extent of the services rendered, among the more intelligent class of physicians, are the fatal results : or, in other words, that he who has charge of the greatest number of patients, almost necessarily sees the greatest number of deaths. His object, therefore, is to retain, first of all, his self-respect ; to receive, first of all, his heart's approval : all else is secondary.

The encouragement extended by the accoucheur, is often all that is required, to bear his patient safely through her trials :—tranquillized by his constant assurance, her frightful anticipations are removed ; her forebodings vanish ; her trust increases ; and each succeeding step, although requiring more fortitude as the agony increases, as the throes are more and more dreadful, is borne with a spirit truly astonishing. Such alone is the aid, which nature in most cases requires ; and if such alone were rendered, far different would frequently be the result, both to the parent and her offspring. Much unnecessary suffering would be prevented ; many invaluable lives would be preserved.

As no obvious attentions are needed in these cases ;—as the system without any unusual interference is so often enabled to accomplish the task imposed—many consider the services of an educated physician as absolutely unnecessary, useless ; that the “ drudgery,” as they term it, may be as well performed by some one else ;—that the occupation is menial, and unbecoming a member of our profession. Such persons lay no stress upon the ground, to which I have just alluded—the moral influence exerted by the physician ;—they do not consider the most obvious refutation to the fallacy of their argument, that *ignorance is dangerous* ;—that should no assistance be needed, an uneducated individual would be most likely to doubt it, and most ready to be officious ;—while at the same time, not being able to foresee a threatening peril, he might prove a most dangerous attendant.

I remarked that the system often required no extraneous assistance—that unaided, unmeddled with,

it was able to accomplish one of the most important purposes of its existence. It is not always thus. Weakened by months of derangement and suffering, nature demands to be aided ;—unaided, her efforts are fruitless ; or, there may have *ever* existed some unnatural condition ;—some deviation from the usual structure of the frame ; some peculiar deformity, rendering the performance of the function spoken of, impossible ; or, the patient may be gradually sinking from the escape of her very life-blood ; or, some frightful malady, at all times alarming, may suddenly burst upon her with the rapidity of lightning, and, if not promptly encountered, leave her almost as quickly, a swollen, distorted, livid corpse. Even the scoffer at this branch of our profession may perhaps be willing to acknowledge that in such cases, a skilful, resolute physician—capable of ascertaining the character of the danger, and with sufficient decision to meet the emergency, is really required. If so, let him remember that the most alarming, fearful, fatal complications not unfrequently accompany the most natural accouchement ; that, in the midst of apparently favorable progress, when all around are looking for a successful termination, the sun is momentarily obscured—and the gust sweeps over a sinking sail ; and, that even when the long dreaded struggle is over, and the few devoted friends have gathered around the bed of the ecstatic mother, too grateful to give utterance to her joy—that even at that moment, when the storm has subsided, and the bow is arching the heavens, the thunderbolt may descend.

At such times as I have referred to, the most efficient aid is required—the heart must feel, but the

man must also act. Some of the most revolting duties may be imperatively demanded of the physician;—they cannot be shunned;—they must be performed. The responsibility may be fearful—as such, it should be assumed and discharged. It may be, that the unborn infant must be destroyed to preserve the life of the mother. What more painful service (who would not involuntarily shrink from the execution of such a task) than to inform her who has anticipated such joy, such unalloyed happiness in the birth of her child, that that child she can never behold alive?—that it must be removed from her, an inanimate, mangled mass. What more distressing duty, save the act itself? the consciousness that through your instrumentality a human being will be prevented from breathing! It may be, that the offspring cannot be even thus extracted;—that the obstacles are of such a nature, that however much it may be reduced, it cannot be liberated. A more terrible course still is left to be pursued—frightful—the *dernier resort*; requiring for its accomplishment, on the part of the patient, perfect submission; on that of the accoucheur, consummate composure.

What has been spoken of, necessarily involves the life of the child only. That which remains to be done, implicates, to a fearful extent, the life of the mother also. Fortunately the physician is very rarely called upon to perform the *Cæsarian section*. Although numerous instances might be cited in which the operation has been attended with successful results, and even where it has been repeatedly performed upon the same individual, it is one of the most trying which can call for the aid of our science. *And when it is remembered that nearly three fourths*

of all who have been operated upon, have died from the effects of that operation, it is not to be wondered at, that a feeling of the greatest reluctance should exist with respect to its performance. Yet, when the accoucheur has satisfied himself that this is the only alternative ; that, if left unimproved, the opportunity will soon have passed forever, he must prepare his patient for the emergency, and discharge his professional duty. The case before him may prove successful ;—the life of his patient may be saved. It may add another, to the already long series of unfortunate terminations—but he can have nothing to regret for neglected duty. He has pursued that course which nature, reason, science have dictated ; he has done all that man could do, and the result only proves how inefficient those efforts often are.

It may be, that the mysterious function having been accomplished, the organ, perfectly exhausted by its immense and long protracted efforts, cannot re-act. It has been stimulated to its utmost limit ; and the sudden removal of the exciting cause has left it powerless—in a state of perfect atony. The circulation, by means of which another has been nourished, and which in ordinary cases is restored to its original channel the moment the temporary need is supplied—unchecked in its course, still pours onward its current. Life is rapidly ebbing—the flagging pulsations are tolling its knell—a moment longer, and those pulsations have ceased forever. No situation can exist—none can be conceived of, requiring more prompt, judicious, decided action. An instant's delay, or the slightest error in treatment, may prove equally fatal. A breath may extinguish the flickering lamp. Upon

himself alone must the physician depend in such an awful emergency. He can claim no counsel. His feelings can be appreciated by those only who have experienced them. His emotions of sadness, as he sees before him her lifeless body, who but a few moments before was painting the future with happiness, and thinks of the broken chain she has left;—his enthusiastic joy, as he perceives the fluttering pulse gradually become firmer; as the respiration appears less oppressed; as the natural temperature is returning; as the eye opens, and consciousness is being restored; and from his very heart he thanks God, that his efforts have been blessed—none can ever comprehend, who have not felt them.

It is not an uncommon occurrence, during pregnancy, for the vessels of the brain to be so distended by the increased quantity of blood which is flowing through them, as to produce symptoms indefinite and unintelligible to the sufferer, but most alarming to the accoucheur;—requiring, for their palliation, his constant, unwearied attention. However much the cerebral disturbance may be thus restrained while the system is in a state of comparative quiescence, these efforts often avail but little during the agonies of labor. Previously dilated to their utmost capacity, through these vessels the vital fluid was with difficulty propelled. The crisis has arrived. Each succeeding paroxysm adds to the peril: each returning wave leaves its impression; until at last, suddenly, perhaps unexpectedly, the barrier yields. A vessel is ruptured—the powerless muscles, the stertorous respiration, the unearthly lethargy, need no interpreter. Death is busy. Although the instances may be rare, in which human aid can avail anything; and

at times no effort is made to revive the powers of the paralyzed system;—still, as it has been known to rally when prostrated by the most frightful puerperal apoplexy, the physician should allow no obstacles to obstruct his efforts. Familiar with the opinions and advice of his brethren, he should yield to them a cordial assent, if his own experience has taught him they are reliable. If, however, he has in similar cases previously conceded his convictions to what has been considered the highest authority, and the result has disappointed him; wedded to no theory, controlled by no master, he should pursue that course, which, under the circumstances, his own judgment approves, however much it may differ from the views of others.

When the mother shall have passed through the trial unscathed, it may not be thus well with her child. It may appear exceedingly feeble, or even apparently lifeless. The long protracted and distressing travail shall seem to have deprived it of vitality;—and the consciousness of its condition causes the mother to wish that she also might have died. She feels that her hopes are blasted, and desires not to survive their blight. It may be that the principle of life is not yet extinct;—that the physical energies are dormant only, and may still be called into action, by the application of skilful, faithful, zealous endeavors. These endeavors should be employed trustfully, perseveringly, until the indications of dissolution are unmistakable. A knowledge that the infant, thus situated, has been resuscitated after hours of unremitting exertion—when all, save the physician, have been hopeless, and have looked upon the means used not only as absurd, but almost as blasphemous—should encourage us in our attempts.

which otherwise would be spiritless. Should the infant appear diseased, or even deformed, its condition should not in the slightest degree affect our conduct. To the eye of the parent, it is perfect;—to ours, it is a fellow-creature. We may save it—we must make the attempt. Its future may be, as, when revived under such circumstances, it often is, *misery*; an existence of constant suffering:—or more fortunate, it may be called early to its rest. This future we cannot foresee. But we must so act, as to receive our own approval.

I have thus merely glanced at a few prominent instances, to show you some of the duties and trials incident to his course, who shall engage in the branch of science it is my office to endeavor to explain.

It only remains for me, gentlemen, to welcome you to these halls of science; to pledge you our united efforts to maintain the enviable reputation of the Harvard School. Since the last course of Lectures, an important change has taken place in this Institution. One of the main pillars,* which added so much to its strength and its beauty, has been removed, and in its stead two columns† have been substituted. To each of which, selected on account of its peculiar fitness, we can point with pride and confidence, feeling assured that they will continue to support unimpaired, what was so nobly borne by the original. I refrain from saying more, “from a fear,” to use the language of one of the jewels of our profession,‡ “that we may be thought to be bandying compliments.”

* Jacob Bigelow, M.D.

† Edward H. Clarke, M.D., George C. Shattuck, M.D.

‡ James Jackson, M.D.



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